



Florida State College at Jacksonville Student Consent and Agreement to Taping/Recording

Name of College: _____

Date: _____

Name of Course: _____

Project Name: _____

I, the undersigned, understand that as a student I am entitled to all state and federal privacy laws including the Family Education and Privacy Act (FERPA) and I waive any claim or privacy right with regard to the recording of video or photographic images and their use in this course and project listed above. I understand that the recording that directly results from this project may be shared and distributed to the public, and I consent to the use of my image in such a manner. I understand that this consent is not mandatory nor is a grade in this course dependent on it. I understand that Florida State College at Jacksonville is not responsible for the unauthorized reproduction of my image and waive any rights and hold Florida State College at Jacksonville harmless from any claims based on the unauthorized reproduction.

Printed Name

Signature

Date